



**CERTIFICATE OF MAILING BY FIRST CLASS MAIL**

Serial No. 10/021,780  
Filing Date: 12/7/2001  
Examiner: T. Solola  
Group Art Unit: 1626  
Docket No. 3015/6

Date of Deposit: November 19, 2004

I hereby certify that these papers or fee is being deposited with the United States Post Office to Addressee service under 37 CFR 1.10 & 1.8 on the date indicated above and is addressed to the Commissioner for Patents, PO Box 1450, Alexandria, VA 22313

Fee Transmittal  
Supplemental Information Disclosure Statement  
Supplemental IDS Form 1449  
Supplemental IDS Reference (1)  
Post Card

Michelle Becker

(Typed or printed name of person mailing paper or fee)

  
(Signature of person mailing paper or fee)



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

# FEE TRANSMITTAL for FY 2005

Effective 10/01/2004. Patent fees are subject to annual revision.

<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\\$)</b>	<b>\$180.00</b>

**Complete if Known**

Application Number	10/021,780
Filing Date	12/07/2001
First Named Inventor	Anantanarayan et al
Examiner Name	T. Solola
Art Unit	1626
Attorney Docket No.	3015/6

**METHOD OF PAYMENT (check all that apply)**

<input type="checkbox"/> Check	<input type="checkbox"/> Credit card	<input type="checkbox"/> Money Order	<input type="checkbox"/> Other	<input type="checkbox"/> None
<input checked="" type="checkbox"/> Deposit Account:				
Deposit Account Number	19-1025			
Deposit Account Name	Pharmacia Corporation			

The Director is authorized to: (check all that apply)

<input checked="" type="checkbox"/> Charge fee(s) indicated below	<input checked="" type="checkbox"/> Credit any overpayments
<input checked="" type="checkbox"/> Charge any additional fee(s) or any underpayment of fee(s)	
<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	

**FEE CALCULATION (continued)**

3. ADDITIONAL FEES		Fee Description		Fee Paid
Large Entity	Small Entity	Fee Code (\$)	Fee Code (\$)	
1051	130	2051	65	Surcharge - late filing fee or oath
1052	50	2052	25	Surcharge - late provisional filing fee or cover sheet
1053	130	1053	130	Non - English specification
1812	2,520	1812	2,520	For filing a request for ex parte reexamination
1804	920*	1804	920*	Requesting publication of SIR prior to Examiner action
1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner action
1251	110	2251	55	Extension for reply within first month
1252	430	2252	215	Extension for reply within second month
1253	980	2253	490	Extension for reply within third month
1254	1,530	2254	765	Extension for reply within fourth month
1255	2,080	2255	1,040	Extension for reply within fifth month
1401	340	2401	170	Notice of Appeal
1402	340	2402	170	Filing a brief in support of an appeal
1403	300	2403	150	Request for oral hearing
1451	1,510	1451	1,510	Petition to institute a public use proceeding
1452	110	2452	55	Petition to revive - unavoidable
1453	1,370	2453	685	Petition to revive - unintentional
1501	1,370	2501	685	Utility issue fee (or reissue)
1502	490	2502	245	Design issue fee
1503	660	2503	330	Plant issue fee
1460	130	1460	130	Petitions to the Commissioner
1807	50	1807	50	Processing fee under 37 CFR § 1.17(q)
1806	180	1806	180	Submission of Information Disclosure Statement
8021	40	8021	40	Recording each patent assignment per property (times number of properties)
1809	790	2809	395	Filing a submission after final rejection (37 CFR § 1.129(a))
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))
1801	790	2801	395	Request for Continued Examination (RCE)
1802	900	1802	900	Request for expedited examination of a design application
Other fee (specify) _____				
SUBTOTAL (3) (\$)				180.00

\*\*or number previously paid, if greater; For Reissues, see above

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3)

(\$)

\$180.00

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Julie M. Lappin	Registration No. (Attorney/Agent)	46,612	Telephone	314-274-2009	
Signature					Date	November 19, 2004

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

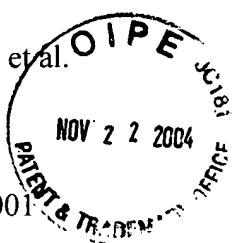
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application of

Anantnarayan, et al.

Serial No. 10/021,780

Filed: December 7, 2001



Attorney Docket No. 3015/6

Group Art Unit: 1626

Examiner: T. Solola

For SUBSTITUTED PYRAZOLES AS P38 KINASE INHIBITORS

November 19, 2004

Commissioner of Patents  
PO Box 1450  
Alexandria, VA 22313

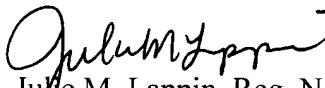
SIR:

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

In accordance with 37 C.F.R. 1.97 and 1.98 and MPEP 609, and in compliance with the duty of disclosure set forth in 37 C.F.R. 1.56, applicants submit herewith one document cited on the attached Form PTO 1449. Applicants respectfully request that the Examiner consider and enter the document cited on the enclosed Form PTO 1449 into the file of the above-identified application. Applicants also request an indication of the same by return of the Form PTO 1449 being initialed and dated by the Examiner.

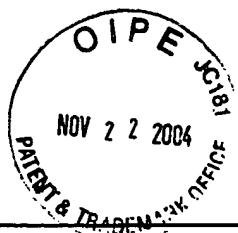
Please charge the fee of \$180.00 to Deposit Account 19-1025. If any additional fees are required or an overpayment of fees made, the Commissioner is hereby authorized to debit or credit our Deposit Account No. 19-1025, as necessary.

Respectfully submitted,

  
Julie M. Lappin, Reg. No. 46,612  
Attorney for Applicants  
(314) 274-2009 (St. Louis)

Pharmacia Corporation  
Corporate Patent Department  
P.O. Box 1027  
Chesterfield, MO 63006

10021780  
11/23/2004 HGU7EM11 000000056 191025  
01 FC:1806 180.00 DA  
01



Sheet 1 of 3

<b>FORM PTO-1449</b> U.S. DEPARTMENT OF COMMERCE, PATENT AND TRADEMARK OFFICE	ATTY. DOCKET NO.: 03015/6	APPLICATION NO.: 10/021,780
<b>SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>	INVENTOR: Anantanarayan, et al.	
(Use several sheets if necessary)	Filed: 12/7/2001	Group: 1626

**OTHER DOCUMENTS (Including Author, Title, Date, Pertinent Pages, Etc.)**

Examiner Initial		
	I	Ferles, Miloslav et al; Collect. Check. Chem. Commun., Vol. 55, pp. 1228-1233, 1990, "Synthesis and Reactions of Novel 1,3-Dipyridinyl-1,3—Propanediones".

EXAMINER	DATE CONSIDERED
----------	-----------------

EXAMINER: Initial if citation considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

(Form PTO-1449)